JON HUSTED
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				
Supporters of Sam Shim				

Full Name of Contributor			Registration Number, if PAC	
Elaine Coifman				

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
625 Seabury Dr				Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Worthington	OH	43085	10/04/2017	50.00

Full Name of Contributor			Registration Number, if PAC	
Benjamin Hatcher				

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
6267 Misty Cove Ln				Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43231	09/26/2017	20.00

Full Name of Contributor			Registration Number, if PAC	
Willis Den				

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
70 Pheasant Dr SE				Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Marietta	GA	30067	09/26/2017	25.00

Full Name of Contributor			Registration Number, if PAC	
Katie Kopalo				

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
7028 Willowford Ln				Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43235	09/26/2017	20.00

Full Name of Contributor			Registration Number, if PAC	
Aliesha Fullerman				

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
6828 Maxwelton Ct				Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43235	09/25/2017	20.00

*Required for contributions from individuals over $100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of $100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total 14